

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA**

Derrick Rankine)
vs.) *Civil Action: 03-0313 Erie*
Joseph)

NOTICE OF INABILITY OF EFFECTUATE SERVICE

The Under signed Hereby certified that on 10/06/05, the Order and Complaint in the above captioned case, and the Notice of Lawsuit and Request for Waiver of Service of Summons and Waiver of Service of Summons were mailed to the above named defendant. No acknowledgment of service has been received, and more than 30 days has elapsed.

*Thomas M. Fitzgerald
United States Marshal
Western District of Pennsylvania*

Sheila Blessing

*By: Sheila Blessing
Administrative Clerk
United States Marshals Service
Western District of Pennsylvania
December 29, 2005*

ORDER

AND NOW, this _____ day of _____, 20____, upon consideration of the foregoing Notice of Inability to Effectuate Service,

IT IS ORDERED that the Clerk of Court prepare duplicate Summons and Complaint,

AND IT IS FURTHER ORDERED that the United States Marshal make personal service of those documents upon the above named defendant.

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF DERRICK RANKINE	COURT CASE NUMBER C-03-313 ERIC
DEFENDANT JOSEPH	TYPE OF PROCESS
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Joseph	
SERVE AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) SCI-Somerset 1600 Waller's Mill Rd, Somerset PA 15510
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
DERRICK RANKINE EU5850 SCI-FAYETTE P.O. BOX 9999 ABELLE PA 158450	
<input type="checkbox"/> Number of process to be served with this Form 285 1 <input type="checkbox"/> Number of parties to be served in this case 25 <input type="checkbox"/> Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold - Defendant Joseph works at SCI-Somerset. - Fold

Signature of Attorney other Originator requesting service on behalf of: Derrick Rankine	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT		09/29/05

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the or the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
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Address (complete only different than shown above)	Date 10/4/05	Time <input type="checkbox"/> am <input type="checkbox"/> pm
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Signature of U.S. Marshal or Deputy
Derrick Joseph

Service Fee 10	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges 10	Advance Deposits	Amounts Owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

MAILED 10/6/05
12/29/05 RETURNED TO COURT UNEXECUTED - NO RESPONSE TO WAIVER OF MAIL

PENALTIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment. Please remit amount payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

FBI - USM
Rev 12/1999
Autographed Copy

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF
DERRICK RANKINE
DEFENDANT
JOSEPHCOURT CASE NUMBER
CA03-313ERIC
TYPE OF PROCESSNAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE **Joseph**
AT **SCI-Somerset 1600 Walters Mill Rd, Somerset PA 15510**
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

**DERRICK RANKINE EU5850
6CZ-FAYETTE
P.O. BOX 9999
LABELLE PA 158450**

Number of process to be served with this Form 285	1
Number of parties to be served in this case	25
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold DEFENDANT JOSEPH works at SCI-Somerset. **Fold****SCANNED**

Signature of Attorney other Originator requesting service on behalf of: Derrick Rankine	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT		09/29/05

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Address (complete only different than shown above)	Date 10/4/05	Time 10:00
	<input type="checkbox"/> am	<input type="checkbox"/> pm

Service Fee 10	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges 10	Advance Deposits	Amount Owed to U.S. Marshal or (Amount of Refund*)
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3. NOTICE OF SERVICE
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED